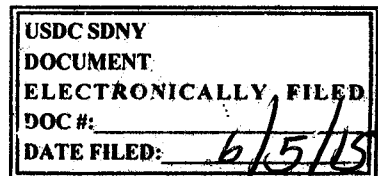


UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF NEW YORKAmelle Beauvil

(In the space above enter the full name(s) of the plaintiff(s).)

-against-

US Department of Education,
GC Services Limited PartnershipAmended
COMPLAINT
1:15-cv-04199-UAJury Trial: ☐ Yes ☒ No
(check one)

(In the space above enter the full name(s) of the defendant(s). If you cannot fit the names of all of the defendants in the space provided, please write "see attached" in the space above and attach an additional sheet of paper with the full list of names. The names listed in the above caption must be identical to those contained in Part I. Addresses should not be included here.)

I. Parties in this complaint:

- A. List your name, address and telephone number. If you are presently in custody, include your identification number and the name and address of your current place of confinement. Do the same for any additional plaintiffs named. Attach additional sheets of paper as necessary.

Plaintiff

Name

Amelle Beauvil

Street Address

117 west 117 street

County, City

New York, NY, 10026

State & Zip Code

New York, NY 10026

Telephone Number

1917-216-6694

- B. List all defendants. You should state the full name of the defendant, even if that defendant is a government agency, an organization, a corporation, or an individual. Include the address where each defendant may be served. Make sure that the defendant(s) listed below are identical to those contained in the above caption. Attach additional sheets of paper as necessary.

Defendant No. 1

Name

U.S. Department of Education

Street Address

P.O. Box 5227

County, City Greenville TN, 75403-5227
 State & Zip Code 75403-5227
 Telephone Number 1-800-621-3115

Defendant No. 2

Name GC Services Limited Partnership
 Street Address PO Box 27323 Knoxville, TN
 County, City Knoxville, TN
 State & Zip Code 37927
 Telephone Number 1-866-846-9964

Defendant No. 3

Name _____
 Street Address _____
 County, City _____
 State & Zip Code _____
 Telephone Number _____

Defendant No. 4

Name _____
 Street Address _____
 County, City _____
 State & Zip Code _____
 Telephone Number _____

II. Basis for Jurisdiction:

Federal courts are courts of limited jurisdiction. Only two types of cases can be heard in federal court: cases involving a federal question and cases involving diversity of citizenship of the parties. Under 28 U.S.C. § 1331, a case involving the United States Constitution or federal laws or treaties is a federal question case. Under 28 U.S.C. § 1332, a case in which a citizen of one state sues a citizen of another state and the amount in damages is more than \$75,000 is a diversity of citizenship case.

A. What is the basis for federal court jurisdiction? (check all that apply)

☒ Federal Questions☐ Diversity of CitizenshipB. If the basis for jurisdiction is Federal Question, what federal Constitutional, statutory or treaty right is at issue? Title 31 U.S.C. 3720d, ET SEQ

C. If the basis for jurisdiction is Diversity of Citizenship, what is the state of citizenship of each party?

Plaintiff(s) state(s) of citizenship _____

Defendant(s) state(s) of citizenship _____

III. Statement of Claim:

State as briefly as possible the facts of your case. Describe how each of the defendants named in the caption of this complaint is involved in this action, along with the dates and locations of all relevant events.

You may wish to include further details such as the names of other persons involved in the events giving rise to your claims. Do not cite any cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. Attach additional sheets of paper as necessary.

A. Where did the events giving rise to your claim(s) occur? It Occured
in New York City.

B. What date and approximate time did the events giving rise to your claim(s) occur? On about April 22nd, 2015

C. Facts: 1) On March 9th, 2015 I received a notice from the Department of Education advising me of their intent to garnish wages pursuant to an alleged student loan debt.

2) Said notice also advised of my rights to object the proposed garnishment and to a hearing on my objections.

3) I submitted an application and documents (attached) for my hearing objecting their right to garnish.

4) After I sent in my application for a hearing, I received a notice dated April 7th, 2015 stating that the garnishment of wages had already begun inacted before my hearing process and review had begun.

What happened to you?

Who did what?

Was anyone else involved?

Who else saw what happened?

IV. Injuries:

If you sustained injuries related to the events alleged above, describe them and state what medical treatment, if any, you required and received.

V. Relief:

State what you want the Court to do for you and the amount of monetary compensation, if any, you are seeking, and the basis for such compensation.

I am requesting injunctive relief to stop any enforcement actions against me until my hearing has been adjudicated. I am also requesting court cost.

I declare under penalty of perjury that the foregoing is true and correct.

Signed this 5 day of June, 2015.

Signature of Plaintiff

Mailing Address

Telephone Number

Fax Number (if you have one)

[Signature]
41 West 112st Apt 7B
New York, NY, 10026

1(917) 216-6694

Note: All plaintiffs named in the caption of the complaint must date and sign the complaint. Prisoners must also provide their inmate numbers, present place of confinement, and address.

For Prisoners:

I declare under penalty of perjury that on this _____ day of _____, 20____, I am delivering this complaint to prison authorities to be mailed to the *Pro Se* Office of the United States District Court for the Southern District of New York.

Signature of Plaintiff: _____

Inmate Number _____



351929438 000121 *****AUTO**MIXED AADC 200
 AMELLE NMN BEAUVIL
 41 W 112TH ST APT 7B
 NEW YORK NY 10026-3931

March 9, 2015

ACCOUNT #: 1020096974

NOTICE OF PROPOSED WAGE GARNISHMENT DUE TO DEBT OWED TO U.S. GOVERNMENT

The U.S. Department of Education (Department) intends to order your employer to withhold 15% of your disposable pay to satisfy your defaulted loan or grant obligation(s). Disposable pay is pay less health insurance premiums and amounts required by law to be withheld (e.g., Social Security, Federal and state taxes). The legal basis for this action is Section 31001(o) of the Debt Collection Improvement Act of 1996 (DCIA), pub. L. 104-134, 110 stat. 1321-358 (Apr. 26, 1996); codified at 31 U.S.C. 3720d. The balance on the debt(s) is \$127,155.08. This includes, for loan debts, the principal loaned and any capitalized interest; for grant debts, the amount of overpayment; for all debts, accrued interest and fees, less any payments, refunds, or offsets received. We apply any payments we recover first to defray our collection costs (currently 25% of the amount of unpaid principal and interest), next to interest; last to principal. This notice explains your right to object to this action; read this entire notice for an explanation of your rights and how to use them.

If you do not timely exercise your rights in the way described below or you do not make a Repayment Agreement or you later fail to make the payments required by such agreement, the Department will order your employer to withhold and send to the Department 15% of your disposable pay each pay period until the balance, with accruing interest and collection costs we incur, is paid in full. (NOTE: the amount actually withheld to pay this debt may be less than 15% of disposable pay, depending on your income and other claims against you.)

You have the following rights regarding this action: you have the right to inspect and copy the Department records relating to your debt. Request Department records through the customer service number below (a request for records will not delay garnishment action unless you have also timely objected to garnishment in the manner specified in this notice).

You have the right to object to the proposed garnishment and to a hearing on your objection.

1. You may object for reasons concerning the existence, amount, and enforceability of the debt.
2. You may also object that having amounts equal to 15% of your disposable pay withheld, from your disposable pay or making voluntary payments in that amount would cause financial hardship for you and your dependents.

You must make a hearing request in writing, and send it to the Department at the address on the enclosed Request for Hearing (RFH) form. If your request is postmarked or received by us within 30 calendar days of the date of this notice we will not garnish until we complete the requested hearing and determine that

garnishment is justified. If your Request for Hearing is postmarked (if mailed) or received (if not mailed) after that date, we will still conduct a hearing but we will not delay this garnishment unless you demonstrate to us that the delay was caused by factors over which you had no control. If we find that the debt is not owed as stated or not enforceable at this time, we will refund payments as needed.

Make your objection by checking the appropriate area on the RFH form. You may request that your hearing be conducted as an oral hearing or as a written record hearing; however, if your request for an oral hearing does not contain an explanation sufficient to show that an oral hearing is necessary, we may provide a written records hearing rather than an oral hearing. Any hearing will include a review of your written statements in the RFH, any records you submit with the RFH, and relevant records the Department holds on your debt.

In or with your Request for Hearing you must present all your objections and submit the evidence that supports them. However, you may submit your objections and evidence later if—

- You request an oral hearing, or
- You timely request a written hearing and also request access to your debt records, or
- You request, and we agree to, an extension for submitting objections and evidence.

In our response to your request(s), we will explain the deadline that applies to your situation; that deadline will be at least 7 business days after our response.

Compliance with a Repayment Agreement will prevent garnishment. To do so, you must agree to repay this debt in monthly installments equal either to 15% of your disposable pay per month or the amount we agree is reasonable based on your financial circumstances. You must also sign and return the Repayment Agreement, and make the first payment under the agreement, within deadlines that will be explained when you contact us to arrange repayment. If both actions are not taken within these deadlines, the process will continue, including the provision of any hearing you may have requested, unless you have already withdrawn that request. If you want to repay but believe you cannot afford payments equal to 15% of your disposable pay, contact customer service at:

GC Services LP
877-244-7901

Repayment under a satisfactory Repayment Agreement can restore eligibility for Federal aid and restore deferment and other benefits previously available on loans. For information, contact customer service. We will cancel garnishment action if we receive payment in full at

US DEPARTMENT OF EDUCATION
NATIONAL PAYMENT CENTER
PO BOX 105028
ATLANTA GA 30348-5028

Make all payment instruments payable to the "U.S. Department of Education" and include your name and account number on the face of the payment instrument.

We will not garnish now if you prove that you have been employed at your current employer for less than 12 months and were involuntarily separated from your most recent previous employment. To object on this ground, check that box on the RFH and provide proof described there.

Your employer may not discharge you from employment nor take disciplinary action against you, as a result of an order for withholding nor can a prospective employer refuse to employ you as a result of this proposed action or existence of an order for withholding. If an employer takes any of these actions, you may sue that employer in a state or Federal Court for reinstatement, back pay, attorney's fees, and punitive damages.

Our determination on your objections affects only the debt(s) described in this notice of garnishment, and is totally separate from any Notice of Proposed Federal Payment Offset or Garnishment which you may have received from a guaranty agency. If you received a notice of collection action from a guaranty agency, you must present any objections to collection action to that agency. Individual debt information is listed below.

U.S. Department of Education
P.O. Box 5227
Greenville, TX 75403-5227
Attn: AWG Hearings Branch

April 29, 2015

Re: Request for Hearing

LETTER OF OBJECTION

I, Amelle Beauvil, hereby objects to the U.S. Department of Education Notice of Proposed Wage Garnishment Due to Debt Owned to U.S. Government for the following reasons;

1. There is no Debt that is actually owed to the U.S.

Since the Debt Type identified in the Notice in question states "Direct" meaning the William D. Ford Federal Direct Loan Program, this program is "government backed" but privately funded; meaning private banks loaned the money.

Therefore the "government" did not actually loan any money in connection with the subject loans and is not at a loss with respect to any alleged default thereto.

2. The subject loans at issue herein were securitized.

The way the banks who actually "funded" the loans in question, financed the subject loans through various securitization schemes. These securitization vehicles are referred to as S.L.A.B.S. (Student Loan Asset Backed Securities).

In the securitization process bonds are created to represent the loan amounts which are then bundled or pooled and sold to investors. In this process the Banks are paid and no longer have any risk associated with any potential default concerning the loans.

Therefore the banks are not a party in interest with respect to the loans and only the investors or bondholders retain any potential risk concerning the subject loans.

3. The U.S. Department of Education lacks authority to enforce any alleged debt concerning the subject loans.

According to the Notice submitted in this matter, it states, "*The legal basis for this action is Section 31001(o) of the Debt Collection Improvement Act of 1996 (DCIA), pub. L.104-134, 110 stat. 1321-358 (Apr. 26,1996); codified at 31 U.S.C. 3720d.*"

31 USC 3720D states at subsection (h) that, "*The Secretary of the Treasury shall issue regulations to implement this section.*" What this means is that regulations are required to enforce the wage garnishment provisions of section 3720D.

However, when I researched 31 CFR to see what regulations the Secretary had implemented, the only regulations I found were for Chapters I, II, IV, VI, VII, VIII, IX & X, which does not include section 3720D which is under Chapter 37.

Therefore, without any implementing regulations having been issued by the Secretary of the Treasury, the Government is without the legal authority to take any actions against me concerning any alleged debt in this matter.

Conclusion

Based on the foregoing, the U.S. Department of Education has failed to submit sufficient information and/or evidence of any alleged debt, any bona fide creditor or any right to enforce any valid indebtedness.

If the U.S. Department of Education has any information or documentation to refute or rebut the facts and/or conclusions of law contained herein, kindly provide the following along with any other information in support of the same.

Kindly provide the following;

A. Any documentation showing the source and means of how the Department of Education funded the subject loans in question.

B. Any documentation showing any loss incurred by the Department of Education or the U.S. Treasury with respect to the subject loans in question.


C. An Affidavit from a person with first hand knowledge stating that the subject loans were never securitized or otherwise funded through such a process.

D. Any and all evidence and/or documentation showing that the subject loans were not subject to any insurance or other indemnification scheme(s).

E. Cite any regulation used and/or relied upon by the Department of Education to enforce its right to the relief it is seeking in this matter.

The foregoing is true and correct to the best of my knowledge and understanding, under the laws of the United States of America.

Sincerely,


Amelle Beauvil

U.S. Department of Education

Financial Disclosure Statement

To evaluate a hardship claim, the U.S. Department of Education (the Department) compares the expenses you claim and support against averages spent for those similar expenses by families of the same size and income as yours. The Department considers proven expenses as reasonable up to the amount of these averages. If you claim more for an expense than the average spent by families like yours, you must provide persuasive explanation why the amount you claim is necessary. These average amounts were determined by the Internal Revenue Service (IRS) from different government studies. You can find the average expense amount that the Department uses at the following Web site: www.irs.gov and then search for "Collection Financial Standards."

- **Complete all items.** Do not leave any item blank. If the answer is zero, write zero.
- **Provide documentation of expenses.** Expenses may not be considered if you do not provide documents supporting the amounts claimed.
- **Disclose and provide documentation of household income.**
- **Failure to provide this information and documentation may result in a denial of your claim of financial hardship.**

Your Name: Amelle Beaulieu **Your Social Security No.:** _____

Address: 41 West 77th St Apt 7B **Phone:** _____

New York, NY, 10026 **Country:** United States

Current Employer: Kaplan K-12 **Date Employed:** 12/29/12

Employer Phone: 877-884-2382 **Present Position:** Teacher

Gross Income: \$ 6,043.14 ☐ Weekly ☒ Bi-Weekly ☐ Monthly ☐ Other _____

Net Income: \$ 4,000.00 ☐ Weekly ☒ Bi-Weekly ☐ Monthly ☐ Other _____

ENCLOSE: COPY OF YOUR TWO MOST RECENT PAY STUBS AND COPIES OF MOST RECENT W-2s AND 1040, 1040A, 1040EZ or other IRS FILING

Number of dependents: 1 (including yourself)

Marital status: ☐ Married ☒ Single ☐ Divorced

Your spouse's name: _____ **Spouse's SSN:** _____

Gross Income: \$ _____ ☐ Weekly ☐ Bi-Weekly ☐ Monthly ☐ Other _____

Net Income: \$ _____ ☐ Weekly ☐ Bi-Weekly ☐ Monthly ☐ Other _____

ENCLOSE: COPY OF TWO MOST RECENT PAY STUBS AND COPIES OF MOST RECENT W-2s AND 1040, 1040A, 1040EZ or other IRS FILING

Other household members(s) with income: _____ SSN: _____

Gross Income: \$ _____ ☐ Weekly ☐ Bi-Weekly ☐ Monthly ☐ Other _____Net Income: \$ _____ ☐ Weekly ☐ Bi-Weekly ☐ Monthly ☐ Other _____**ENCLOSE: COPY OF TWO MOST RECENT PAY STUBS AND
COPIES OF MOST RECENT W-2s AND 1040, 1040A, 1040EZ or other IRS FILING****Other Income**Child support: \$ _____ ☐ Weekly ☐ Bi-Weekly ☐ Monthly ☐ Other _____Alimony: \$ _____ ☐ Weekly ☐ Bi-Weekly ☐ Monthly ☐ Other _____Interest: \$ _____ ☐ Weekly ☐ Bi-Weekly ☐ Monthly ☐ Other _____Public assistance: \$ _____ ☐ Weekly ☐ Bi-Weekly ☐ Monthly ☐ Other _____

Other: \$ _____ Describe: _____

Please explain all deductions shown on pay-stubs:

Deductions	Amount	Reason
401K:	_____	_____
Retirement:	_____	_____
Union Dues:	_____	_____
Medical:	_____	_____
Credit Union:	_____	_____
Other:	_____	_____

Shelter (SEND COPY OF MORTGAGE OR LEASE)Rent/Mortgage: \$ 900 p/m Paid to whom: _____2nd home mortgage: \$ _____ Paid to whom: _____

Home/Renter insurance: \$ _____

Other: \$ _____ Describe: _____

Food and HouseholdExpenses: \$ 400Clothing: \$ 200**Utilities (SEND COPIES OF BILLS)**Electric: \$ 50Gas: \$ 50

Water/Sewer: \$ _____

Garbage pickup: \$ _____

Basic telephone: \$ 90

Other: \$ _____ Describe: _____

Medical (SEND COPIES OF BILLS)

Insurance \$ _____ /per month

(Only list payments not deducted from paycheck)

Bill payments \$ _____ /per month

(Only list payments not covered by insurance)

Other: \$ _____ /per month

Describe: _____

Transportation (SEND COPIES OF CAR PAYMENT AGREEMENT OR BILLS)

Of cars _____

1st Car payment: \$ _____ /per month2nd Car payment: \$ _____ /per month

Gas and oil: \$ _____ /per month

Public transportation: \$ 120. /per month

Car insurance: \$ _____ /per month

Other: \$ _____ Describe: _____

Child Care (SEND COPIES OF BILLS)

Child care: \$ _____ /per month

Number of children: _____

Child support: \$ _____ /per month

Number of children: _____

Other: \$ _____ /per month

Describe: _____

Other Insurance: \$ _____ Describe: _____

Other Expenses (Attach a list describing expense, monthly payment and enclose bills)

Based on this Statement, I think I can afford to pay \$ 0 per month

I declare under penalty of law that the answers and statements contained herein are true and correct.

Signature _____

Date 4/2/15

Warning: 18 U.S.C. 1001 provides that "whoever...knowingly and willfully falsifies, conceals or covers up by any trick, scheme, or device a material fact, or makes any materially false, fictitious, or fraudulent statement or representation...shall be fined up to \$10,000.00 or imprisoned up to five years, or both"

Complete, sign, and return the requested information and documentation to:


US DEPARTMENT OF EDUCATION
PO BOX 5227
GREENVILLE TX 75403-5227

Privacy Act Notice

This request is authorized under 31 U.S.C. 3711, 20 U.S.C. 1078-6, and 31 U.S.C. 3720D. You are not required to provide this information. If you do not, we cannot determine your financial ability to repay your student aid debt. The information you provide will be used to evaluate your ability to pay. It may be disclosed to government agencies and their contractors, to employees, lenders, and others to enforce this debt; to third parties in audit, research, or dispute about the management of this debt; and to parties with a right to this information under the Freedom of Information Act or other Federal law, or with your consent. These uses are explained in Notice for System of Records 18-11-07, 64 FR 30166 (June 4, 1999), 64 FR 72407 (Dec. 27, 1999). We will send a copy at your request.

Monthly Statement

Statement for
AMMELLE BEAUVILAccount number
757652738Bill close date
May 06, 2015

Balance		
Previous balance		\$231.41
Payment received on 04/14		(\$115.00)
Credits and adjustments		(\$13.07)
Unpaid balance	 Due now	\$103.34
Current charges		\$86.63

Total amount due by 05/27/15 **\$189.97**

Save valuable time each month by enrolling in EasyPay automatic payment. Set up is easy through your My T-Mobile account. Sign up at t-mobile.com/easypay.

Current charges		
Line	Amount	Change from last month
(917) 216-6694	\$86.63	\$29.78 ↓
Total	\$86.63	


---Manifest Line-----

AMMELLE BEAUVIL
41 W 112TH ST APT 70
NEW YORK NY 10026-3915

Bill highlights

Follow numbers throughout bill.

① "Change from last month" does not include changes to taxes and fees unless associated with changes in service plan or Equipment Installment Plan (EIP).

 Pay now, if you have not. Late charges may be incurred.

① You had usage charges.

② A line on your account was suspended.

③ A fee was charged.

① Stop running to the mailbox and start reducing your paper clutter. Go digital by enrolling in paperless billing at t-mobile.com/paperless.

Questions?

For more information visit my.t-mobile.com

Please detach this portion and return with your payment. Please make sure address shows through window.



Statement for: AMMELLE BEAUVIL
Account number: 757652738

Pay online: t-mobile.com/pay

Pay by phone: *PAY (*729)



Scan to pay

Total amount due
by 05/27/15**\$189.97**Amount
enclosed

T-MOBILE

PO BOX 790047

ST. LOUIS MO 63179-0047

☐ Sign up for EasyPay - Check box and complete reverse side.

☐ If you changed your address - Check box and record new address on the reverse side.

0407576527380527150000189972100263915

Kaplan K-12 Learning Services
395 Hudson St
New York, NY 10014
877/884-2382

Pay Group: B Kaplan K-12 Learning Services
Pay Begin Date: 03/29/2015
Pay End Date: 04/11/2015

Business Unit: 00074
Advice #: 000000040435389
Advice Date: 04/17/2015

Case 1:15-cv-04199-JA Document 4 Filed 06/05/15 Page 13 of 23

Amelle Beauvil 41 west 112 street apt 7b New York, NY 10026	Employee ID: 000254913 Department: K0750-PC K12 Revenue & Direct Costs Location: Virtual EEs Job Title: PC Faculty - PT Pay Rate: \$25.000000 Hourly	TAX DATA: Federal NY St Marital Status: Exempt Sin Allowances: Addl. Pct: Addl. Amt:
---	--	--

HOURS AND EARNINGS						TAXES		
Description	Rate	Hours	Earnings	Hours	Earnings	Description	Current	YT
Prior Period Off Set			-4.68		-28.08	Fed Withholding	0.00	0.0
Other Teaching	8.750000	19.82	173.43	231.85	2,026.46	Fed MED/EE	6.13	107.4
Teacher	35.000000	7.25	253.75	153.50	5,372.50	Fed OASDI/EE	26.20	459.4
Teacher Training			0.00	4.50	39.38	NY Withholding	4.05	246.6
						NY OASDI/EE	1.20	9.1
						NY NEW YORK Withholding	3.64	162.6
TOTAL:		27.07	422.50	389.85	7,410.26	TOTAL:	41.22	985.3

BEFORE-TAX DEDUCTIONS			AFTER-TAX DEDUCTIONS			EMPLOYER PAID BENEFITS		
Description	Current	YTD	Description	Current	YTD	Description	Current	YT
TOTAL:	0.00	0.00	TOTAL:	0.00	0.00	*TAXABLE		

	TOTAL GROSS	FED TAXABLE GROSS	TOTAL TAXES	TOTAL DEDUCTIONS	NET PAY
Current	422.50	422.50	41.22	0.00	381.28
YTD	7,410.26	7,410.26	985.34	0.00	6,424.92

YEAR-TO-DATE	PAID TIME OFF	SICK LEAVE
Start Balance	0.0	11.7
+ Earned	0.0	13.0
+ Bought	0.0	0.0
- Taken	0.0	0.0
- Sold	0.0	0.0
+ Adjustments	0.0	0.0
End Balance	0.0	24.7

NET PAY DISTRIBUTION			
Advice #000000040435389	Account Type Checking	Account Number 058780254	Deposit Amount \$381.28
TOTAL:			\$381.28

MESSAGE: For Payroll and Wage Garnishment Questions Contact 877-884-2382

Pay Group:	B-Kaplan K-12 Learning Services
Pay Begin Date:	03/15/2015
Pay End Date:	03/28/2015

Business Unit:	00074
Advice #:	000000040430926
Advice Date:	04/03/2015

Amelle Beauvil 41 west 112 street apt 7b New York, NY 10026	Employee ID: 000254913 Department: K0750-PC K12 Revenue & Direct Costs Location: Virtual EEs Job Title: PC Faculty - PT Pay Rate: \$25.000000 Hourly	TAX DATA: Marital Status: Federal Allowances: Exempt Addl. Pct: Addl. Amt:	NY State Single 1
--	---	---	--------------------------------

BEFORE-TAX DEDUCTIONS			AFTER-TAX DEDUCTIONS			EMPLOYER PAID BENEFITS		
<u>Description</u>	<u>Current</u>	<u>YTD</u>	<u>Description</u>	<u>Current</u>	<u>YTD</u>	<u>Description</u>	<u>Current</u>	<u>YTD</u>
TOTAL:	0.00	0.00	TOTAL:	0.00	0.00	*TAXABLE		
TOTAL GROSS EMPLOYEE SALARY \$100,000								

	TOTAL GROSS	FED TAXABLE GROSS	TOTAL TAXES	TOTAL DEDUCTIONS	NET PAY
Current YTD	1,295.48	1,295.48	182.58	0.00	1,112.90
	6,987.76	6,987.76	944.12	0.00	6,043.64
YEAR-TO-DATE	PAID TIME OFF	SICK LEAVE			

YEAR-TO-DATE	PAID TIME OFF	SICK LEAVE
Start Balance	0.0	11.7
+ Eamed	0.0	12.1
+ Bought	0.0	0.0
- Taken	0.0	0.0
- Sold	0.0	0.0
+ Adjustments	0.0	0.0
End Balance	0.0	23.8

NET PAY DISTRIBUTION		
	<u>Account Type</u>	<u>Account Number</u>
Advice #000000040430926	Checking	058780254
		<u>Deposit Amount</u>
		\$1,112.90
TOTAL:		\$1,112.90

MESSAGE: For Payroll and Wage Garnishment Questions Contact 877-884-2382

All copies of your W-2 are on this page, separated by perforations. The white copies are for your tax return; the blue copy is for your records. General instructions for these forms, including an explanation of the letter codes used in box 12, are on the other side of the page.

All copies of your W-2 are on this page, separated by perforations. The white copies are for your tax return, the blue copy is for your records. General instructions for these forms, including an explanation of the letter codes used in box 12 are on the other side of the page.

Page 15 of 23

B. CONTROL NUMBER		This information is being furnished to the Internal Revenue Service		2014	OMB NO. 1545-0008		1. WAGES, TIPS, OTHER COMPENSATION		2. FEDERAL INCOME TAX WITHHELD		
1. 121		B. EMPLOYER IDENTIFICATION NUMBER		A. EMPLOYER'S SOCIAL SECURITY NUMBER		3. SOCIAL SECURITY WAGES		4. SOCIAL SECURITY TAX WITHHELD			
C. EMPLOYER'S NAME, ADDRESS, AND ZIP CODE		KAPLAN K12 LEARNING SERVICES L		16. STATE WAGES, TIPS, ETC.		17. STATE INCOME TAX		18. LOCAL WAGES, TIPS, ETC.		19. LOCAL INCOME TAX	
1015 WINDWARD RIDGE PKWY		ALPHARETTA, GA 30005		080-68-7517		11688.58		11688.58		234.12	
D. CONTROL NUMBER		This information is being furnished to the Internal Revenue Service		OMB NO. 1545-0008		1. WAGES, TIPS, OTHER COMPENSATION		2. FEDERAL INCOME TAX WITHHELD			
1. 121		B. EMPLOYER IDENTIFICATION NUMBER		A. EMPLOYER'S SOCIAL SECURITY NUMBER		3. SOCIAL SECURITY WAGES		4. SOCIAL SECURITY TAX WITHHELD			
C. EMPLOYER'S NAME, ADDRESS, AND ZIP CODE		KAPLAN K12 LEARNING SERVICES L		16. STATE WAGES, TIPS, ETC.		17. STATE INCOME TAX		18. LOCAL WAGES, TIPS, ETC.		19. LOCAL INCOME TAX	
1015 WINDWARD RIDGE PKWY		ALPHARETTA, GA 30005		080-68-7517		11688.58		11688.58		234.12	
E. EMPLOYEES FIRST NAME AND INITIAL		LAST NAME		13. Salaried Employee <input type="checkbox"/> Retiree <input type="checkbox"/> Third-Party <input type="checkbox"/>		11. NONQUALIFIED PLANS		10. DEPENDENT CARE BENEFITS		12. 4-D	
AMELLE BEAUVIL		41 WEST 112 STREET APT 7B		NEW YORK, NY 10026		11688.58		807.36		724.69	
F. EMPLOYER'S ADDRESS AND ZIP CODE		16. STATE WAGES, TIPS, ETC.		17. STATE INCOME TAX		18. LOCAL WAGES, TIPS, ETC.		19. LOCAL INCOME TAX		20. LOCALITY NAME	
1015 WINDWARD RIDGE PKWY		ALPHARETTA, GA 30005		080-68-7517		11688.58		11688.58		NEW YORK CITY NY	
G. EMPLOYER'S NAME, ADDRESS, AND ZIP CODE		KAPLAN K12 LEARNING SERVICES L		16. STATE WAGES, TIPS, ETC.		17. STATE INCOME TAX		18. LOCAL WAGES, TIPS, ETC.		19. LOCAL INCOME TAX	
1015 WINDWARD RIDGE PKWY		ALPHARETTA, GA 30005		080-68-7517		11688.58		11688.58		234.12	
H. EMPLOYER'S NAME, ADDRESS, AND ZIP CODE		KAPLAN K12 LEARNING SERVICES L		16. STATE WAGES, TIPS, ETC.		17. STATE INCOME TAX		18. LOCAL WAGES, TIPS, ETC.		19. LOCAL INCOME TAX	
1015 WINDWARD RIDGE PKWY		ALPHARETTA, GA 30005		080-68-7517		11688.58		11688.58		234.12	
I. EMPLOYER'S NAME, ADDRESS, AND ZIP CODE		KAPLAN K12 LEARNING SERVICES L		16. STATE WAGES, TIPS, ETC.		17. STATE INCOME TAX		18. LOCAL WAGES, TIPS, ETC.		19. LOCAL INCOME TAX	
1015 WINDWARD RIDGE PKWY		ALPHARETTA, GA 30005		080-68-7517		11688.58		11688.58		234.12	
J. EMPLOYER'S NAME, ADDRESS, AND ZIP CODE		KAPLAN K12 LEARNING SERVICES L		16. STATE WAGES, TIPS, ETC.		17. STATE INCOME TAX		18. LOCAL WAGES, TIPS, ETC.		19. LOCAL INCOME TAX	
1015 WINDWARD RIDGE PKWY		ALPHARETTA, GA 30005		080-68-7517		11688.58		11688.58		234.12	
K. EMPLOYER'S NAME, ADDRESS, AND ZIP CODE		KAPLAN K12 LEARNING SERVICES L		16. STATE WAGES, TIPS, ETC.		17. STATE INCOME TAX		18. LOCAL WAGES, TIPS, ETC.		19. LOCAL INCOME TAX	
1015 WINDWARD RIDGE PKWY		ALPHARETTA, GA 30005		080-68-7517		11688.58		11688.58		234.12	
L. EMPLOYER'S NAME, ADDRESS, AND ZIP CODE		KAPLAN K12 LEARNING SERVICES L		16. STATE WAGES, TIPS, ETC.		17. STATE INCOME TAX		18. LOCAL WAGES, TIPS, ETC.		19. LOCAL INCOME TAX	
1015 WINDWARD RIDGE PKWY		ALPHARETTA, GA 30005		080-68-7517		11688.58		11688.58		234.12	
M. EMPLOYER'S NAME, ADDRESS, AND ZIP CODE		KAPLAN K12 LEARNING SERVICES L		16. STATE WAGES, TIPS, ETC.		17. STATE INCOME TAX		18. LOCAL WAGES, TIPS, ETC.		19. LOCAL INCOME TAX	
1015 WINDWARD RIDGE PKWY		ALPHARETTA, GA 30005		080-68-7517		11688.58		11688.58		234.12	
N. EMPLOYER'S NAME, ADDRESS, AND ZIP CODE		KAPLAN K12 LEARNING SERVICES L		16. STATE WAGES, TIPS, ETC.		17. STATE INCOME TAX		18. LOCAL WAGES, TIPS, ETC.		19. LOCAL INCOME TAX	
1015 WINDWARD RIDGE PKWY		ALPHARETTA, GA 30005		080-68-7517		11688.58		11688.58		234.12	
O. EMPLOYER'S NAME, ADDRESS, AND ZIP CODE		KAPLAN K12 LEARNING SERVICES L		16. STATE WAGES, TIPS, ETC.		17. STATE INCOME TAX		18. LOCAL WAGES, TIPS, ETC.		19. LOCAL INCOME TAX	
1015 WINDWARD RIDGE PKWY		ALPHARETTA, GA 30005		080-68-7517		11688.58		11688.58		234.12	
P. EMPLOYER'S NAME, ADDRESS, AND ZIP CODE		KAPLAN K12 LEARNING SERVICES L		16. STATE WAGES, TIPS, ETC.		17. STATE INCOME TAX		18. LOCAL WAGES, TIPS, ETC.		19. LOCAL INCOME TAX	
1015 WINDWARD RIDGE PKWY		ALPHARETTA, GA 30005		080-68-7517		11688.58		11688.58		234.12	
Q. EMPLOYER'S NAME, ADDRESS, AND ZIP CODE		KAPLAN K12 LEARNING SERVICES L		16. STATE WAGES, TIPS, ETC.		17. STATE INCOME TAX		18. LOCAL WAGES, TIPS, ETC.		19. LOCAL INCOME TAX	
1015 WINDWARD RIDGE PKWY		ALPHARETTA, GA 30005									

AFFIDAVIT OF AMELLE BEAUVIL

I, Amelle Beauvil, being duly sworn, over the age of eighteen, and having firsthand knowledge of the facts which pertain herein, deposes and says:

1. The information submitted to the Department of Education concerning The Financial Disclosure Statement on April 23rd, 2015 is a true, correct, and complete description of my financial transaction and monies received for the year 2014.


2. Neither The Department of Education or CG Services has provided any statute or regulation which compels me to provide Form 1040 in order to prove my income for the year in question.

3. Based on the monies earned it is my position that I was not required to file a return of tax for the year in question.

4. Absent any information, documentation, and/or sworn statement to the contrary the information submitted by me to the Department of Education pursuant to my objection to its proposed wage garnishment should be sufficient to prove my income for the year in question.

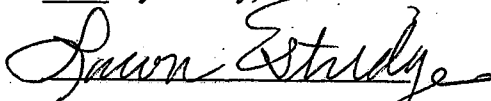
5. The foregoing is true and correct to the best of my knowledge and belief under the laws of the United States of America.

Dated: New York, New York
May 26, 2016


Amelle Beauvil
41 West 112th Street – Apt. 7B
New York, New York 10026

Sworn to before me this

26 day of May, 2015


LAWSON ESTRIDGE, NOTARY PUBLIC
STATE OF NEW YORK
No: 01ES4900397
QUALIFIED IN QUEENS COUNTY
CERTIFICATE FILED IN N.Y. COUNTY
COMMISSION EXPIRES 01/11/2018

II. IF YOU WANT AN IN-PERSON OR TELEPHONE HEARING, YOU MUST COMPLETE THE FOLLOWING:

The debt records and documents I submitted to support my statement in Part III do not show all the material (important) facts about my objection to collection of this debt. I need a hearing to explain the following important facts about this debt: **(EXPLAIN** the additional facts that you believe make a hearing necessary on a separate sheet of paper. If you have already fully described these facts in your response in Part III, **WRITE HERE** the number of the objection in which you described these facts ____.)

Note: If you do not request an in-person or telephone hearing, we will review your objection based on information and documents you supply with this form and on records in your loan file. We will provide an oral hearing to a debtor who requests an oral hearing and shows in the request for the hearing, a good reason to believe that we cannot resolve the issues in dispute by reviewing the documentary evidence. An example is when the validity of the claim turns on the issue of credibility or veracity.

III. Check the objections that apply. EXPLAIN any further facts concerning your objection on a separate sheet of paper. ENCLOSE the documents described here (if you do not enclose documents, the Department will consider your objection(s) based on the information on this form and records held by the Department).

For some objections you must submit a completed application. Obtain applications by contacting Customer Service at the number below, or go to the Department's Web site at: www.myeddebt.com, **select Forms, then select the application described for that objection.**

1. () I do not owe the full amount shown because I repaid some or all of this debt. (ENCLOSE: copies of the front and back of all checks, money orders and any receipts showing payments made to the holder of the debt.)
2. () I am making payments on this debt as required under the repayment agreement I reached with the holder of the debt. (ENCLOSE: copies of the repayment agreement and copies of the front and back of checks where you paid on the agreement.)
3. () I filed for bankruptcy and my case is still open. (ENCLOSE: copies of any documents from the court that show the date that you filed, the name of the court, and your case number.)
4. () This debt was discharged in bankruptcy. (ENCLOSE: copies of debt discharge order and the schedule of debts filed with the court.)
5. () The borrower has died. (ENCLOSE: Original, certified copy, or clear, accurate, and complete photocopy of the original or certified Death Certificate.) For loans only.
6. () I am totally and permanently disabled - unable to engage in substantial gainful activity because of a medically-determinable physical or mental impairment. (Obtain and submit a completed Loan Discharge Application: Total and Permanent Disability form. The form must be completed by a physician except if you are a veteran, in which case you can submit required documentation from the U.S. Department of Veterans Affairs. Refer to the application for all requirements.) For loans only.
7. () I used this loan to enroll in _____ (school) on or about ____/____/____, and I withdrew from school on or about ____/____/____. I paid the school \$ _____ and I believe that I am owed, but have not been paid, a refund from the school in the amount of \$ _____. (Obtain and submit a completed Loan Discharge Application: Unpaid Refund form. ENCLOSE: any records you have showing your withdrawal date). For loans only.

This is an attempt to collect a debt and any information obtained will be used for that purpose

REQUEST FOR HEARING

8. () I (or, for parent PLUS borrowers, the student) used this loan to enroll in _____ (school) on or about ____/____/____ and was unable to complete the education because the school closed. (Obtain and submit a completed Loan Discharge Application: School Closure form. ENCLOSE: any records you have showing your (or, for parent PLUS borrowers, the student's) withdrawal date.) For loans only.

9. () This is not my Social Security Number, and I do not owe this debt. (ENCLOSE: a copy of your driver's license or other identification issued by a Federal, state or local government agency, and a copy of your Social Security Card.)

10. (✓) I believe that this debt is not an enforceable debt in the amount stated for the reason explained in the attached letter. (Attach a letter explaining any reason other than those listed above for your objection to collection of this debt amount by garnishment of your salary. ENCLOSE: any supporting records.)

11. () I (or, for parent PLUS borrowers, the student) did not have a high school diploma or GED when I (or, for parent PLUS borrowers, the student) enrolled at the school attended with this guaranteed student loan. The school did not properly test my (or, for parent PLUS borrowers, the student's) ability to benefit from the training offered. (Obtain and submit a completed Loan Discharge Application: False Certification (Ability to Benefit) form. ENCLOSE: any records you have showing your withdrawal date.) For loans only.

12. () When I borrowed this guaranteed student loan to attend _____ (school), I (or, for parent PLUS borrowers, the student) had a condition (physical, mental, age, criminal record) that prevented me (or, for parent PLUS borrowers, the student) from meeting State requirements for performing the occupation for which the school training was provided. (Obtain and submit completed Loan Discharge Application: False Certification (Disqualifying Status) form. For loans only.

13. () I was involuntarily terminated from my last employment and I have been employed in my current job for less than twelve months. (Attach statement from employer showing date of hire in current job and statement from prior employer showing involuntary termination.)

14. () I believe that _____ (name of individual or other party) without my permission signed my name or used my personal identification data to execute documents to obtain this loan, and I did not receive the loan funds. (Obtain and submit a completed False Certification (Unauthorized Signature/Unauthorized Payment) discharge application or Identity Theft Certification). Enclose any records showing your withdrawal date). For loans only.

IV. I state under penalty of law that the statements made on this request are true and accurate to the best of my knowledge.

DATE: 4/2/15

SIGNATURE: 

SEND THIS REQUEST FOR HEARING FORM TO:

US DEPARTMENT OF EDUCATION
ATTN: AWG HEARINGS BRANCH
PO BOX 5227
GREENVILLE TX 75403-5227

If you wish to arrange a voluntary agreement for payments in amounts equal to 15% of your disposable pay, do not use this form. Instead, call the Customer Service telephone number below:

U.S. Department of Education Customer Service
1-800-621-3115

Violation of any such agreement may result in an immediate order to your employer for garnishment of 15% of your disposable pay.

This is an attempt to collect a debt and any information obtained will be used for that purpose.

http://studentloansstudentloans.info

The First to Reveal the Truth About the Default Student Loan

I am the Industry-Insider that Revealed the Truth on How to overcome the Financial Death Traps set up by the student loan industry!

Here's a behind the scenes, exclusive interview with The Rogue Student Loan Collector where he reveals what REALLY goes on behind the scenes in the student loan industry and Department of Education... (and why he despises the Department of Education and is now committed to helping student loan borrowers, by revealing the institutions sneakiest tricks and biggest secrets...)

A series of interview questions showing real life examples of The Rogue Student loan collector "Getting Over" on the unsuspecting borrowers, raping them with colossal payments on their loans, ripping student loan borrower's off on settlement by using scare tactics, and hammering borrowers by using the element of mystery (and shows you the truth on how to cancel your default student loan).

With this mind-blowing information from The Rogue Student Loan collector (a Production Manager at a student loan collection agency contracted by the DOE you are going to make the collectors bow down to you. Yes – You'll really be able to save Hundreds or Thousands of dollars on your student loan debt without ever being tricked or coerced by the collectors when you use the secrets The Rogue Student loan collector is about to give you...

The Real Truth About the Securitized Default Student Loan

According to the Federal Register, student loans are securitized which means that student loans were sold or are pooled with other student loans endorsed into a trust. These trusts are called asset backed securities.

Asset Backed Securities collateralized by student loans ("SLABS") comprise one of the four (along with home equity loans, auto loans and credit card receivables) core asset classes financed through asset-backed securitizations and are a benchmark subsector for most floating rate indices. Federal Family Education Loan Program (FFELP) loans are the most common form of student loans and are guaranteed by the U.S. Department of Education ("DOE") at rates ranging from 95%-98% (if the student loan is serviced by a servicer designated as an "exceptional performer" by the Department Of Education the reimbursement rate was up to 100%). As a result, performance (other than high cohort default rates in the late 1980s) has historically been very good and investors' rate of return has been excellent. The College Cost Reduction and Access Act became effective on October 1, 2007 and significantly changed the economics for FFELP loans; lender special allowance payments were reduced, the exceptional performer designation was revoked, lender insurance rates were reduced, and the lender paid origination fees were doubled. See: wikipedia

Student loans

ABS collateralized by student loans ("SLABS") comprise one of the four (along with home equity loans, auto loans and credit card receivables) core asset classes financed through asset-backed securitizations and are a benchmark subsector for most floating rate indices .[citation needed] Federal Family Education Loan Program (FFELP) loans are the most common form of student loans and are guaranteed by the U.S. Department of Education ("USDE") at rates ranging from 95%–98% (if the student loan is serviced by a servicer designated as an "exceptional performer" by the USDE the reimbursement rate was up to 100%).[citation needed] As a result, performance (other than high cohort default rates in the late 1980s) has historically been very good and investors rate of return has been excellent.[citation needed] The College Cost Reduction and Access Act became effective on October 1, 2007 and significantly changed the economics for FFELP loans; lender special allowance payments were reduced, the exceptional performer designation was revoked, lender insurance rates were reduced, and the lender paid origination fees were doubled.

A second, and faster growing, portion of the student loan market consists of non-FFELP or private student loans. Though borrowing limits on certain types of FFELP loans were slightly increased by the student loan bill referenced above, essentially static borrowing limits for FFELP loans and increasing tuition are driving students to search for alternative lenders. Students utilize private loans to bridge the gap between amounts that can be borrowed through federal programs and the remaining costs of education.[7]

The United States Congress created the Student Loan Marketing Association (Sallie Mae) as a government sponsored enterprise to purchase student loans in the secondary market and to securitize pools of student loans. Since its first issuance in 1995, Sallie Mae is now the major issuer of SLABS and its issues are viewed as the benchmark issues. Although to a few this may have been unfair or inflationary, it appeared to have been legitimate.

See: Impact of Securitization and securitization-a-primer/

According to SEC rules student loans are supposed to be transferred into a trust; however they never actually deliver the note. If the note is **NOT** indorsed into the trust the note is void and uncollectable.

So what are they securitizing?

They are securitizing a **COPY** of that note.

All notes securitized by a transfer of the "borrower's" or grantor is void and uncollectible. Also, securitization of a **COPY** of the note is a violation of the Uniform Commercial Code Article 9. If the note is not endorsed into the trust the note is void and uncollectable.

Student loan debt collectors violate the Fair Debt collection Practices Act because they threaten to take you to court and they have no intentions of doing so. In some cases this violation is worth \$1,000.00 fine.

The Student Loan Contract

Student loans are governed by the United States Office of Education.

Most student loan borrowers will have the original contract in their possession because when they got these loans they got these documents and they faxed a copy on the contract to the loan broker so the company does not have the original. But in the contract it says that they don't have it (and they know that) and that you agree to the terms and conditions by holding on to the original note

The Administrative Process to Cancel Default Student Loan

I have yet to see where any money was used by the department of education that actually funded any loan and that's what they say on these loans "your loan was funded by the Department of Education" when it wasn't. **It was funded by private investors, as a student loan security.**

You may want to call me for more information about wiping out your default student loan.

See letter from Sally Mae showing student loan default removed from credit report by the administrative process. See: Letter

<http://studentloansstudentloans.info> is here to show you how to legally cancel your student loans.

See Also:

- About Student Loans and Securitization
- Asset Backed Securities:
- Collection Agencies and Your Rights
- Obama Seeks Debt Collector Proposal

- Cancel Your Securitized Student Loans

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